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# GETAC Recap

**Note:** For a more detailed recap of GETAC, go to <http://www.dshs.state.tx.us/emstraumasystems/WebExtra.shtm>.

The Governor's EMS and Trauma Advisory Council (GETAC) met Friday, May 25, 2007, in Austin. Written comments concerning the February 23, 2007 meeting minutes were provided requesting that 1) the Air Medical Committee's report to GETAC include the following: the committee chair reported that DSHS legal counsel informed committee members that the department is unable to require Commission on the Accreditation of Medical Transport Systems (CAMTS) deemed status as a condition for air ambulance licensure because states are pre-empted from directly or indirectly regulating areas concerning aircraft safety; and 2) both the Air Medical Committee's report and the combined Air Medical Committee/EMS Committees' report to GETAC include the following: the committee chairs reported that DSHS legal counsel informed committee members that portions of the draft EMS subscription rule may be in conflict with federal pre-emption laws. It was the consensus of the committee members that approval of the draft February 23, 2007, minutes be postponed until the document is edited to incorporate the two changes and the amended minutes reviewed again on August 24, 2007, at the next scheduled GETAC meeting.

Chair Edward Racht, MD introduced David L. Lakey, MD, DSHS state commissioner of health, and made a report. Kathryn C. Perkins, assistant commissioner for the Division for Regulatory

Services, Steve Janda, director of the Office of EMS and Trauma Systems Coordination, and Linda Jones, manager of the Texas EMS/Trauma Registry, made reports.

## **Air Medical Committee**

– Chair Shirley Scholz reported the committee reviewed “lifeguard” helicopters, “prior permission required” helipads, and forwarded related questions to the CMS for an opinion on possible violations; discussed federally pre-empted items during state licensure survey processes and possibility of FAA and DSHS joint surveys of Texas air medical providers; and the possibility of a rule requiring hospitals to designate an area for helicopters.

**Education Committee** – Chair Jodie Harbert reported the committee discussed the Strategic Planning for EMS Education in Texas; and concerns about DSHS certification and background check processes. The Committee met with the EMS and Medical Directors committees later to discuss the Comprehensive Clinical Management Program (CCMP) rule.

**EMS Committee** – Chair Pete Wolf discussed the gurney car bill; delivering pre-hospital care reports to receiving hospitals; Trauma Systems database problems; and strategic planning for EMS education in Texas. The Committee met with the Education and Medical Directors committees later to discuss the CCMP rule.

**Injury Prevention Committee** – In the absence of chair Gary Kesling, committee member Rick Moore reported the committee discussed support for the Regional Advisory Council (RAC) Chairs and Trauma Registry funding. The committee will begin “The Multi-Team Impact

Project” to identify target injury populations, intervention and prevention programs, and evaluative tools.

## **Medical Directors Committee**

– In the absence of chair Steve Ellerbe, DO, committee member Mitch Moriber, DO, reported the committee reviewed the Stroke Committee's draft recommendations; discussed EMS medical directors' concerns including stroke treatment effectiveness and the emergency transport plan; and discussed alternative standards on medical buses during disasters. The Committee met with the Education and EMS committees later to discuss the CCMP rule.

**Pediatric Committee** – Chair Joan Shook, MD, reported the committee discussed the national Emergency Medical Services for Children (EMSC) performance measures relating to a DSHS grant; support for data acquisition comparing Texas to the nation and developing improvement programs; essential equipment for ambulances; on-line and off-line medical control for EMS providers; and transfer agreements.

**Stroke Committee** – Chair Neal Rutledge, MD, reported the committee received a presentation pertaining to the history of the RACs; and overviews of the committee's current recommendations for a stroke emergency transport plan, Texas stroke center designation and recent legislative funding.

Other reports were given from the following: Disaster/Emergency Preparedness Task Force, EMS and Trauma Regulatory Task Force, DSHS Preparedness Coordination Council, Traumatic Brain Injury Advisory Council and Texas EMS,

Trauma, and Acute Care Foundation (TETAF). The Council also heard public comment.

For the complete reports on these committees and task forces, go to [www.dshs.state.tx.us/emstraumasystems/WebExtra.shtm](http://www.dshs.state.tx.us/emstraumasystems/WebExtra.shtm).

#### **Action Items:**

*A motion was made by Vance Riley and seconded by Mr. Harbert to postpone approval of the February 23, 2007, meeting minutes until the next scheduled meeting in August. The motion passed unanimously.*

*A motion was made by Mr. Harbert and seconded by Ms. Scholz to endorse the CCMP draft document that was distributed to council members after it was modified by DSHS staff following discussion at the Education Committee, EMS Committee, and Medical Directors committee meetings. The motion passed unanimously.*

*A motion was made by Dr. Shook and seconded by Mr. Wolf to endorse and support the EMSC performance measure surveys that will be sent to stakeholders by Texas EMS/Trauma Registry staff. The motion passed unanimously.*

*A motion was made by Mr. Wolf and seconded by Dr. Shook to support the Trauma Systems Committee's recommendation that the current management structure of the Texas EMS/Trauma Registry and the challenges facing it be re-evaluated, and for the Council to work with DSHS to correct the issues. The motion passed unanimously.*

*A motion was made by Mr. Harbert and seconded by Mr. Riley to accept the recommendations from the Disaster/Emergency Task Force as presented, while recognizing that it is a "fluid document." The motion passed unanimously.*

*A motion was made by F.E. Shaheen to accept the recommendations for Title 25 of the Texas Administrative Code, 157. XX EMS Subscription Plans draft document. A friendly amendment was offered by Mr. Wolf to remove the language concerning the air medical providers and accept the document for ground ambulances in order to move forward to approve this document. Mr. Shaheen accepted the friendly amendment and Ms. Scholz then seconded the motion. The motion passed unanimously.*

*A motion was made by Ms. Scholz and seconded by Mr. Shaheen for the Texas hospital licensing rules to incorporate a process to ensure immediate and rapid access to the emergency department from a designated helipad, helistop, or other safe landing area for air ambulances at all licensed general hospitals. This helipad or other area must be available for use 24 hours a day/7 days a week. The helipad shall be of appropriate size and construction to allow any licensed air ambulance in the State of Texas to land safely. The process would be generally consistent with the requirements for trauma facility designation of all levels as defined in 25 TAC 157.125(x)(I)(2). A waiver process shall be incorporated to accommodate specific concerns. The waiver process shall have independent reviewers as well as a DSHS review process. The motion was passed unanimously.*

*A motion was made by Mike Click and seconded by Mr. Shaheen to accept the Stroke Committee's draft recommendations in the GETAC report to the legislature*

*and that DSHS begin drafting a rule. The motion passed unanimously.*

Future meeting dates in 2007: August 22-24 in Austin, and November 17-19 in Houston, in conjunction with the 2007 EMS Conference.

Adjournment: The meeting was adjourned at 12:31 p.m. ●

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Texas Service Center four years ago. Prior to that, the Concho Valley providers were handled through the Midland and El Paso offices. The Concho Valley RAC, Trauma Service Area K, covers over 16,000 square miles, including 13 frontier counties in West/Central Texas. TSA K consists of 15 EMS providers, five registered first responder organizations, one air medical service, four education programs and several CE training programs. TSA K has 12 medical centers, with two Level III trauma centers and seven Level IV trauma centers. One of the biggest issues for emergency medical care in Concho Valley is time and distance between the medical facilities and EMS providers.

#### **Past/current certifications:**

EMT-B (1975), EMT-I (1996), instructor (1993), advanced coordinator (1998), AHA CPR instructor (1994), volunteer firefighter, EMT-P (1998).

#### **How long in EMS?**

32 Years

#### **How long with the state?**

Four years

#### **Phone Number/email address**

325-659-7854

[patrick.campbell@dshs.state.tx.us](mailto:patrick.campbell@dshs.state.tx.us) ●